

AMENDED IN ASSEMBLY MAY 5, 2009
AMENDED IN ASSEMBLY MARCH 31, 2009
CALIFORNIA LEGISLATURE—2009–10 REGULAR SESSION

ASSEMBLY BILL

No. 861

Introduced by Assembly Member Ruskin

February 26, 2009

An act to add Section 100571 to the Health and Safety Code, relating to public health.

LEGISLATIVE COUNSEL'S DIGEST

AB 861, as amended, Ruskin. Public health services: consolidated contracts.

Under existing law, the State Department of Public Health is authorized, within its authority to contract with a provider for the provision of health services, to enter into a single contractual instrument encompassing services in any number of specified health services subject areas.

This bill, in addition, would require the department, within existing resources, to *develop and implement, in consultation with local health jurisdiction representatives, a model* consolidated and streamlined administration and contracting process with ~~the counties local health jurisdictions~~ for the department's ~~center of infectious diseases and the center for family health~~ *Center for Infectious Diseases and Center for Family Health*, and the programs administered by the respective centers. The bill would require the 2 designated program centers within the department to develop ~~a consolidated and streamlined administration of its programs by developing, at a minimum, uniform program requirements and unified contracts across multiple related program~~

areas. ~~The bill would require each program center to develop a single model allocation contract between the department and each county local health jurisdictions that incorporates the programs administered by the program center, including, but not limited to, specified elements.~~

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 100571 is added to the Health and Safety
2 Code, to read:

3 100571. (a) In order to unify overlapping programs that address
4 community public health needs administered by the program
5 centers within the State Department of Public Health, and to reduce
6 administrative costs to counties so that more resources are available
7 to directly serve the families and the communities ~~towards~~ toward
8 whom the programs are directed, the State Department of Public
9 Health, within existing resources, shall ~~implement a~~ develop and
10 implement, in consultation with local health jurisdiction
11 representatives, a model consolidated and streamlined
12 administration and contracting process with ~~counties local health~~
13 jurisdictions for the department's ~~center for infectious diseases~~
14 and the center for family health *Center for Infectious Diseases and*
15 the Center for Family Health, and the programs administered by
16 the respective centers.

17 ~~(b) Each program center specified in subdivision (a) shall~~
18 ~~develop a consolidated and streamlined administration of its~~
19 ~~programs by developing, at a minimum, uniform program~~
20 ~~requirements and unified contracts across multiple related program~~
21 ~~areas. Each program center shall develop a single allocation~~

22 (b) Prior to July 1, 2011, the Center for Infectious Diseases and
23 the Center for Family Health shall each develop a single model
24 allocation contract between the department and ~~each county local~~
25 health jurisdictions that incorporates the programs administered
26 by the program center, which shall include, but need not be limited
27 to, all of the following elements:

28 (1) Consistent budget regulations, including format, indirect
29 costs rate, and allowable costs.

30 (2) A single invoice format.

31 (3) Uniform reporting requirements and outcome measures.

1 (4) Uniform staff time surveys.

2 (c) This section shall not authorize a ~~county~~ *local health*
3 *jurisdiction* to discontinue meeting its obligations under existing
4 law to provide services or to reduce its accountability for the
5 provision of these services.

6 (d) The ~~public health~~ program centers subject to this section
7 may waive regulations regarding the method of providing services
8 and the method of reporting and accountability, as may be required
9 to meet the goals set forth in subdivision (b). However, the program
10 centers shall not waive a regulation pertaining to privacy and
11 confidentiality of records, civil service merit systems, or collective
12 bargaining. The program centers shall not waive a regulation if
13 the waiver results in a diminished amount or level of services or
14 benefits to an eligible recipient, as compared to the benefits and
15 services that would have been provided to a recipient absent the
16 waiver.

17 (e) For purposes of this section, “program center” means an
18 administrative subdivision of the State Department of Public
19 Health, whether created by statute or by administrative regulation,
20 that oversees and administers multiple public health programs
21 relating to a specified public health subject area.